

12/20/04

IDAHO DEPARTMENT OF AGRICULTURE
DIVISION OF ANIMAL INDUSTRIES
BUREAU OF ANIMAL HEALTH
OFFICE OF THE AQUACULTURE COORDINATOR
P.O. Box 7249
Boise, Idaho 83707

RETURN THIS COPY

COMMERCIAL FISH REARING LICENSE APPLICATION
Fee: \$25.00 No: _____

Please line-out any incorrect information with a RED PEN (write any corrected information above/beside the lined-out information). If you are re-registering without any changes - sign & date form before returning.

As provided for in Chapter 46, Title 22, Idaho Code, application is hereby made to possess and/or propagate specified species of fish at an approved facility:

APPLICANT: First/Last: _____
Phone: _____ Address: _____
City: _____ State: _____ Zip: _____

FACILITY NAME: _____
COMPANY NAME : _____

FACILITY OWNER: _____
Phone: _____ Address: _____
City: _____ State: _____ Zip: _____

PROPERTY OWNER: _____
Phone: _____ Address: _____
City: _____ State: _____ Zip: _____

Facility Location: _____

_____ Are you a fee fishing operation? (Yes/No)

Area (Dept. Use Only): _____
County: _____ Township: _____ Range: _____ Section: _____

Years in Production at this facility: _____
Number of Concrete Raceways: _____
Dimensions of Concrete Raceways: _____
Number of Earthen Ponds: _____
Dimensions of Earthen Ponds: _____
_____ Are raceways & ponds screened to prevent bird predation? (Yes/No)

Watersource: _____

IDAHO DEPARTMENT OF AGRICULTURE

12/20/04

RETURN THIS COPY

COMMERCIAL FISH REARING LICENSE APPLICATION

Page 2

APPLICANT: First/Last: _____

Stream or watershed where facility is located:

Average Daily Discharge (CFS) Flow: _____ Receiving Water: _____

_____ Have Applications been submitted for approval on any and all effluent facilities to the appropriate state or federal agency ? (Yes/No)

EPA Discharge Permit #: _____ Expires: ____/____/____

_____ Exempt from EPA Discharge Permits ? (Yes/No)

_____ If exempt from EPA Discharge Permits - please check reason:

_____ Annual Production is less than 20,000 pounds.

_____ Feed less than 5000 pounds per month.

_____ Non-commercial (Private Pond Permit).

_____ EPA Discharge permit not required for warm water facilities.

_____ Is this facility constructed in or across any natural streambed, lake, or other watercourse containing wild fish ? (Yes/No)

_____ Are Dams or diversion structures for this facility in accordance with the requirements of section 36-906(a), Idaho Code ? (Yes/No)

_____ Are all water inlets to this facility screened in the appropriate manner ? (Yes/No)

SPECIES TO BE HELD AT THIS FACILITY:

Specie: _____ Source: _____

Source Address: _____ City: _____

State: _____ Zip: _____

Specie: _____ Source: _____

Source Address: _____ City: _____

State: _____ Zip: _____

Specie: _____ Source: _____

Source Address: _____ City: _____

State: _____ Zip: _____

Specie: _____ Source: _____

Source Address: _____ City: _____

State: _____ Zip: _____

Specie: _____ Source: _____

Source Address: _____ City: _____

State: _____ Zip: _____

Specie: _____ Source: _____

Source Address: _____ City: _____

State: _____ Zip: _____

COMMERCIAL FISH REARING LICENSE APPLICATION

Page 3

APPLICANT: First/Last: _____

The fish produced in this facility are (check the correct answers):

- ☐ 1. Processed in Idaho ☐ 3. Stocked in Idaho
☐ 2. Processed out of Idaho ☐ 4. Stocked out of Idaho

The annual Production Range of this facility is (check the correct answer)

- ☐ 1. <20,000 lbs ☐ 4. 500,000 - 1,000,000 lbs
☐ 2. 20,000 - 100,000 lbs ☐ 5. 1,000,000 - 10,000,000 lbs
☐ 3. 100,000 - 500,000 lbs

License #: _____ Date Issued: ____/____/____ Expiration Date: ____/____/____

We would appreciate if you would attach photocopies of your applications
or certifications for your water rights permits, N.P.D.E.S. permits,
and 401 certification.

I, the undersigned applicant, am an authorized agent of the facility
named above.

I the undersigned applicant understand and accept the provisions of the
Idaho Code contained on the application.

Signature: _____ Date: _____

Title and Organization _____

I give permission to the Idaho Department of Agriculture to release the
name, address, and telephone number of this facility as part of a mailing
list or telephone list to any person who may request such a list.

_____ Yes, _____ No

I understand that if I withhold permission to release the name, address,
and telephone number of this facility, this information will not be
released as part of a mailing list or telephone list pursuant to
Idaho Code § 9-348. _____ Initial.

(NOTE: Remainder of form is for Department of Agriculture use only)

Approved by: _____ Date: _____
